

SPECIALTY QUALIFICATION TRAINING RECORD (SQTR)
Incident Commander – Level 3

NAME (Last, First, MI)

CAPID

DATE ISSUED

Prerequisites

Item
Qualified Operations Section Chief

Date Completed

The above listed member has completed the required prerequisite training for the incident commander - level 3 specialty.

UNIT/WING/REGION COMMANDER OR
AUTHORIZED DESIGNEE'S SIGNATURE

DATE

Familiarization and Preparatory Training

Task

Evaluator's CAPID and
Date Completed

Complete NIIMS G193 or equivalent

The above listed member has completed the required familiarization and preparatory training requirements for the incident commander - level 3 specialty qualification and is authorized to serve in that specialty while supervised on training or actual missions.

UNIT/WING/REGION COMMANDER OR
AUTHORIZED DESIGNEE'S SIGNATURE

DATE

Advanced Training

Task

Evaluator's CAPID and
Date Completed

Complete Task C-4000 Demonstrate the ability to select an incident staff

Complete Task C-4001 Demonstrate ability to complete an ICS Form 201

Complete Task C-4002 Demonstrate ability to develop and approve an incident Action Plan (ICS Forms 202-206 with attachments)

Complete Task C-4003 Demonstrate ability to closeout a mission including completion of ICS Form 115

Complete Task C-4004 Demonstrate the ability to conduct major incident briefings

Complete Task C-4005 Demonstrate the ability to coordinate with other agencies

Complete Task C-4130 Demonstrate ability to select and establish a suitable Incident Command Post or staging area

Complete Task P-0101 Demonstrate ability to keep a log

Complete Flight Release Officer training

Complete the appropriate portion of CAPT 117, *Emergency Services Continuing Education examinations*

Exercise Participation

The above listed member satisfactorily participated as an incident commander - level 3 trainee under my direct supervision on mission number _____.

QUALIFIED SUPERVISOR'S SIGNATURE

DATE

The above listed member satisfactorily participated as an incident commander - level 3 trainee under my direct supervision on mission number _____.

QUALIFIED SUPERVISOR'S SIGNATURE

DATE

Unit Certification and Recommendation

The above listed member has completed the requirements for the incident commander - level 3 specialty qualification and is authorized to serve in that specialty on training or actual missions.

UNIT/WING/REGION COMMANDER OR
AUTHORIZED DESIGNEE'S SIGNATURE

DATE

IC3 SQTR, APR 05

OPR/ROUTING: DOS